

VOLUME 6-No. 10

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The Sanatorium Board's Christmas Seal office is bustling with activity these days as preparations are made for the 1964 Christmas Seal Campaign to raise funds for tuberculosis prevention. Among the volunteers who have been helping to stuff envelopes for mailing are a group of women curlers from Winnipeg, pictured here with Sanatorium Board staff. Seated at the table in the foreground are left to right: Mrs. Nora Leask. Mrs. Doris Shaw, Mrs. Connie Driver and Mrs. Margaret Morrison. On the other side of the table: Mrs. Myrtle Driver, Rudy Trnka, super-visor of the mailing room, Mrs. Daisy Hutchison, Christmas Seal Supervisor Miss Mary Gray, Mrs. Kay Johnson, and Mrs. Pat Holting. In the background, Miss Esther Lee of the Christmas Seal Department, Alex Nunn, portering staff, and Reg Stanforth, mailing room. (Photo by David Portigal).

Seal Sale Preparation in Full Swing

about three weeks time postmen throughout Mani-toba will be packing in their bags great bundles of long, well-stuffed envelopes. These the Sanatorium Board's stmas Seal letters which each year are mailed to some 180,000 residents to raise funds for a province-wide protam of tuberculosis pre on.

For most of us the Christmas Seal Campaign is but a brief, once-a-year event, stretching at most from mid-November to Christmas. We buy the colorful seals . . . we use them gladly on our holiday mail . . . knowing that the funds they raise will be put to good use to protect us all from an age-old killer.

ut for a few of our Sanatorium Board staff and for a corps of some 200 volunteers, the entry of the mas Seal letters into the ber mails represents almination of many long months of hard work involving the folding of half of a million sheets of Christmas Seals and addressing, sorting and stuffing envelopes.

For two staff members, the TB Christmas Seal Sale is a year-round, full-time job. As soon as one campaign ends in late February, work begins for the next. Through the spring and summer months Seal Sale Supervisor Miss Mary Gray and her assistant, Esther Lee, carry out the tedious task of readying the c a m p a i g n mailing list. Around the end of May the Sanatorium Board's volunteers, including some 60 to 70 junior volunteers from the Winnipeg high schools, take over the job of folding the n e w sales. Soon after the IBM Department begins addressing envelopes. These must then be sorted according to street and zone by Miss Gray and Miss Lee before the volunteers begin stuffing envelopes in late September.

Since September 28 groups of these volunteers have been coming into our offices daily to do the stuffing. To bolster the work three special blitz nights were arranged for October 6, 14 and 20. The largest of these, on October 20, is a special annual event involving about 100 business girls from all parts of the city.

The other volunteers who take part in the campaign preparations include a group of women curlers in Winnipeg and members of the Professional Engineers' Wives, P.E.O. Sisterhood (Chapter D), Ladies Auxiliary of the Associated Canadian Travellers, Rotary-Anns of Winnipeg, West Winnipeg and St. Boniface, Calvary Temple Mission Circle and Lupior B'nai Circle and Junior B'nai B'rith.

Many of the Sanatorium Board staff also help out. Perhaps the hardest workers are Alex Nunn, who each year transports the supplies for the stuffing sessions, and Rudy Trnka and Reg Stan forth, who run the letters through the stamp machine, tie them in bundles and store them in mail sacks according to zone. It is a tribute to the intense, personal interest they take in their work that no more than a dozen out of the 180,000 letters ever reach the post office improperly prepared.

To these three . . . and indeed to all who take such a splendid part in the campaign preparations . . . the Sana -torium Board extends its deepest thanks.

Sanatorium Board Welcomes Yukon TB-Health Association

For many years the crusade against tuberculosis in Canada has been led by 10 provincial voluntary associations, each working in liaison with the parent body, the Canadian Tuber-culosis Association. This month the CTA and members of the affiliated provincial organizations take great pleasure in welcoming an 11th new member to our ranks: the Tuberculosis and Health Assiciation of the Yukon.

The Yukon Tuberculosis and Health Association was officially formed on Septem-ber 25 when 10 representatives from various communities met in Whitehorse to elect a president -Jim Gentleman, Whitehorse — and lay the groundwork for an anti-tuberculosis campaign.

Special guests were Dr. C. W. L. Jeanes, executive secretary of the Canadian Tuberculosis Association, J. M. McKenzie, general secretary of the Alberta Tuberculosis Association, and Dr. Matthew Matas Edmon-ton, regional superintendent, Medical Services, Depart -ment of National Health and Welfare.

At the meeting it was announced that the Alberta Tuberculosis Association will act as consultants to the Yukon group on behalf of the CTA. It was also decided that additional local associations will be formed in the districts of Dawson City, Mayo, Keno Hill, Watson Lake and Whitehorse. Each district will conduct its own Christmas Seal Campaign, after which funds will be pooled for an over-all program of tuberculosis prevention.

To help the new association get a start, Dr. Jeanes, on behalf of the CTA, presented them with a \$1,000 cheque.

As a kind of prelude to the association's formation, the Yukon witnessed its first mass tuberculin and x-ray survey. Carried out in July and August, the survey fol-lowed the "Operation Door step" procedure of the British Columbia Tuberculosis Society, in which a mobile van (lent by the B.C. Society) and survey teams moved from community to community and house to house.

It is to the great credit of the people of the Yukon that out of a total population of just over 12,000, no less than 11,000 took advantage of the free tuberculin and x-ray examinations.

The Sanatorium Board joins the other provincial associations and the CTA in extending a very warm welcome and good wishes for success to our new sister association.

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BOARD

Today's Patient — A Forgotten Man?

"As groups and individuals active in the field of health, eager to do our best, each in our own particular sphere of endeavour, we have tended to overlook that the final object of all our well-meant attention is a single, undissected human

being who from birth to death is exposed to threats to his 'physical, mental and social well-being'. Our program should have the unity that its purpose demands, so that the entire spectrum of services is focused on the individual in such a way that each segment produces its effect in relation to and in balance with all other seg-ments."

Such was the plea of Manitoba Minister of Health C. H. Witney when, in a keynote address to the 13th annual Manitoba Hospital and Nursing Conference at the Royal Alexandra Hotel October 6, he spoke about the astonishing rise in health costs in Canada and about the patient, the individual, who should be the centre of all our efforts --- but who, in fact, may well have become a "forgotten" man" a forgotten man who never-theless must foot the "health" bill.

The Sanatorium Board News Bulletin is pleased to be able to present the following excerpt from the Minister's address:

Amid the welter of divergent groups and sub-groups, we may well ask whether the individual, the patient, has become the "forgotten man' in the picture. To quote Grover Cleveland: "The Cleveland: Grover delving forgotten man away in patient industry, supporting his family, paying his taxes, casting his vote, supporting the church and the school — but he is the only one for whom there is no provision in the great scramble and the big divide. Such is the forgotten man. He works, he votes, generally he prays - but his chief business in life is to pay . . . Who and where is the forgotten man in this case who will have to pay for it all?"

I think there is evidence that in the field of health services, too, there may be "the great scramble and the big divide". Is not the present fragmentation in the health field, the imbalances, lack of unified approach, the absence of a complete program centred on the individual is not all this the result of a scramble by divergent groups for privilege, position and economic spoils? Is there not evidence that the effort to get in on the big divide is a a dominant force in the motivation of almost every group involved in the field of health?

Too often communities value the hospital primarily as a commercial asset hospital system planned and developed on this basis cannot yield best results in terms patient care. Medical of people, too, might do some soul searching to determine which of the principles and prerogatives they so vigor-ously defend can stand up when measured in terms of the interest of the forgotten man and which of these prerogatives may after all only be a manifestation of the great scramble and the big divide.

I think there is some evidence that Canadians are perhaps not getting as good value for their health dollar as they might. It is, of course, extremely hard to attach a price tag to a commodity as priceless as health. On the other hand, medical, hospital and other personal health services are only a fragment of the total requirements for a human being's physical and mental well-being. A multitude of other human needs, including the very basic ones of food, shelter, and beyond that, recreation and many other services, are also important.

When viewed in relationship to total human needs, and therefore to the national economy generally, it is possible to arrive at some kind of relative value for personal health services, particularly if their cost reaches the point where it reduces funds available for other essential needs. There is no doubt that when put to the test, the national expenditure for health care is subject, like everything else, to the law of diminishing returns.

In 1961 . . . the total bill for health services in Canada was approximately 12/3 billion dollars . . . Of this amount, over $1\frac{1}{2}$ billion dollars were spent for personal health services including physicians', dentists', and hospital services and prescription drugs. These four items in the aggregate, accounted for 4.17% of the Gross National Product, compared for instance to the United States where these services amounted to 3.86% of the G.N.P., and the United Kingdom with 3.25%. When you include other countries in this comparison, it is apparent that Canadians spend the highest proportion their resources for perof

sonal health services of any nation in the world.

Canada is at the head of the list in another significant way — that is, in hospital admissions p e r 1,000 popu-lation. In 1960, there were 145 admissions per 1,000 population compared with 120 in the United States and only 87 in the United Kingdom.

With this as general background we might now con sider the situation in Manitoba. Considering only acute general hospital and extended treatment facilities we had 3,137 beds in 1948, or 4.2 beds per 1,000 population. We now have 6,600 beds or 7 per 1,000 population. In these 15 years the population increased 25%. The volume of hospital care, measured in patient days per 1,000, increased 100% and the number of hospital employees increased 200%.

During the same period the total cost of hospital services provided to Manitobans increased from \$6,200,000 in 1948 to almost \$42,000,000 in 1963. From 1948 to 1963 the cost of living increased by only 30%. but average per diem hospital rates increased over 200% and the per capita cost of hospital services, reflecting both increased costs and increased utilization, rose by over 400%.

I submit that all these figures present a rather startling picture — startling enough to make us wonder whether we are really on course towards our goal of getting the best possible value from our health dollar.

All the groups involved in the field of health now face a great challenge. It is to develop a unified health program centred on the individual and getting the best value out of our health dollar. No single group c a n reach this goal alone; it will require the combined cooperative effort of all of us together. I think it is time we began to move in that direction. I think it is time we began to remove some of the obstacles that stand in the way of a truly concerted group effort. * ж

To attain this objective, Mr. Witney proposed the

DON'T MISS!

CANDLE FAIR AND GIFT COURT

Friday, November 13 — 9 a.m. to 4 p.m.

In the Auditorium

Manitoba Rehabilitation Hospital

Arranged by the Volunteer Services, Manitoba Rehabilitation Hospital, in aid of M. R. H. Equipment Fund.

Christmas Cards
Gift Items

Mannee Candles Gift Wrap Patient Handicrafts Services, Mani

adoption of the following maxims:

Each group must place the general public interest first. "To parody a well-known phrase," he said. "Not what is good for XYZ Motors, or general hospitals or general practitioners is necessarily good for the country. But what is good for the country is good for all of these.

We must establish effective means of communica-tion between each other and between us and the people we are serving.

"Specialization is unavoidable in a society as complex as ours, but each group which has responsibilities in one specialized aspect of society should pursue policies which fully recognize the needs and aspirations of society as a whole . . . Moreover, each group should actively com-municate its ideas to the general public in terms which the lavman can understand Regardless at what level a debate of public issues takes place, the people as a whole are involved because they are the ones for whose benefit the services are provided and they are the ones who have to foot the bill.'

We must be forward looking and keep in step with the times — we must not waste our energies in vain attempts to preserve esta blished systems and prerogatives.

"The active involvement of Government in respect to hospital services should be regarded as a natural development which reflects the need of our society to provide collectively those things which the individual could not provide with his own resources. It would be wrong to see in this a danger to our democratic way of life or a disavowal of eternal truths.

The mental attitude with which we approach our problems should contain a good deal of pragmatism and ordinary common sense.

"There is nothing wrong in raising our sights to the stars as long as we keep our feet on the ground and remember that the right path and the right conclusions may as often be found in homely common sense as in high-flown theoretical principles."

93 Delegates Attend National O.T. Conference

Ninety-three occupational therapists from all parts of Canada registered for the 34th annual Conference of the Canadian Association of Occupational Therapists at the Manitoba Rehabilitation Hospital, October 7 to 10.

This was the first time in the association's 44-year-old history that the annual conference has been held in Winnipeg and only the second time it has been held west of Ontario.

The association's presi dent, Dr. J. N. Swanson of Toronto, presided over the sessions which incl l lectures, clinical demonsuations, workshops and a general business meeting. The subjects covered in-cluded the treatmen * ?) arthritis, modern trends psychiatric treatment, recent research in the field of mongolism, quadriplegia and pre and post-operative treatment of Parkinsonism.

The program stressed the important and creative role of the occupational therapist in helping to return patients disabled by injury or disease to the fullest possible measure of independence. During a two-day, pre-conference seminar on hemiplegia, the Approaches to Independent Living" were discussed and demonstrated. James Foort, technical director of the Manitoba Rehabilitan Hospital's Prosthetic and Orthotic Research and Development Unit, and his assistant, Ian Cochrane, demonstrated the splints braces used in the rehat tion of hemiplegic and arthritic patients; Mrs. Jean Judy, M.R.H. occupational therapist, showed and talked about the numerous self p devices which can be used in home-making. Towards the end of the conference a display of special equipment and clothing for the handicapped was held at the nearby Kinsmen Centre.

Other Sanato-ium Board staff members who took part in the conference were T. A. .J. Cunnings, executive director, who was guest guest speaker at a luncheon October 8; Miss E. L. Thorpe, nursing consultant, who at the pre-conference study course lectured on the nursing management of hemiplegic patients; Dr H. Truelove, chief of me Jal services, Manitoba Rehabilitation Hospital.

Mrs. Joy Huston, chief occupational therapist at the rehabilitation hospital, was in charge of the conference arrangements.

AROUND OUR INSTITUTIONS Staff Sports and Recreation

Members of the staff at Charwater Lake Hospital planned an exciting fall and winter recreational program which includes everything from handicrafts to a giant bingo and a bridge and whist drive.

The Northwood Hall Recreation Club met on September 23 to elect a new committee and plan some of the year's events. Charley Notkaluk, of the Hospital's maintenance department, is the new chairman for 1964-65. Other officers are: Vicechairman, Miss Joan Lindsay, clerk-typist; second vicechairman, Miss Martha Commodore, of the nurses' a 'ant staff; secretarytreasurer, Mrs. Lucy Hoksbergen, secretary to the chief of medical services.

The program got under September 27 with a Turkey Shoot at The Pas Pistol and Revolver Club. The next major event will be a masquerade dance on October 31.

The Hallowe'en d a n c e promises to be a gala affair. For only \$1.00 admission fee, the staff and their guests will be able to dance to a sixpiece orchestra, take part in a grand march, compete for spot dance prizes, and partake of a sumptuous warm lunch at midnight.

In charge of the lunch is Miss Marga Steffen, assisted by Dave Willerton and Irene I say. The entertainment committee is Mrs. Myra Kaiser, Dave Willerton, Miss Beverley Smith and Jim Roberts. Posters will be made Jackie Savoie, Linda b and Lorette Szmul; Cliff Spafford will head the clean-up committee.

There is lots of opportunity for other staff to help with the preparations. New decorations will be required this year and more volunteers will be needed to help with the food.

Other recreation facilities and activities planned for the staff this year include:

Billiards: A charge of 15 cents per game is being imposed this year, the money to be used for the upkeep of the equipment. There is also a t limit of one-half hour for men; three-quarters of an hour for women. Those who wish to play are asked to enter their names on the in board in the pool rocal.

Handicrafts: Staff members who would like to be come members of the craft club should enter their names below the posters on the bulletin board. *Bowling*: The new bowling committee this year is Dave Willerton, Jim Roberts and Miss Denise Geary, and those wishing to join the group should contact one o f these people. Meets will be held at The Pas.

Bingo, Bridge and Whist Drives: A bingo is scheduled for October 22, the Bridge and Whist Drive for October 27. Make sure you don't miss them!

Christmas Choirs: The first meeting to plan for the Christmas singing was held September 29. Dr. John D. MacNeil has kindly offered to accompany the choir on the piano.

Films: Members of the Northwood Recreation Club are invited to attend the Sunday film nights, now under way.

M.R.H. Sports Club

The Manitoba Rehabilitation Hospital Chapter of the Manitoba Medical Centre Recreation Club met in the hospital auditorium S e p t ember 24 to elect officers for the 1964-65 season.

Mrs. Doris J. Setter, clinic al nursing instructor, was elected chairman of the M.R.H. chaper. She succeeds Miss E. L. M. Thorpe, M.B.E., Sanatorium Board nursing c o n s u l t a n t, who during the past year has served the hospital staff with great distinction.

Miss Thorpe has agreed to be vice-chairman of the chapter during the next season; Mrs. Pat Holting, Sanatorium Board information writer, is the new secretary and Gordon Hurley, IBM supervisor for the Sanaotorium Board, is a gain treasurer.

A. H. Atkins, hospital manager, was named the chapter's representative to the M.M.C. Recreation Club.

Sports Activities: Six major activities have been planned f o r the season, and persons wishing to join any of these groups should contact either a member of the M.R.H. Chapter Executive C o mmittee, or representatives o f each activity. T h e following groups welcome new memb e r s (and this includes beginners) at any time:

Badminton: Now under w a y Tuesday and Thursday evenings in the rehabilitation hospital's large gymnasium 5:30 to 8:30. Contacts are Miss Heather Liddell, M.R.H. Occupational Therapy Department, Local 305; or Dennis Birdsell, Winnipeg General ospital, Local 679. The fee is \$1.50 for the season.

Ceramics: Now under way at the Manitoba Rehabilitat i o n Hospital Wednesday evenings 5:30 to 7:30. Contact Leon K i n s b e r g e n, Rehabilitation Hospital Occupational Therapy Department, Local 305. The fee is \$6.00 for the 1964-65 season.

Gymnastics: Classes are held each Monday from 5:15 to 6:30 p.m. in the rehabilitation h os p i t a l l a r g e gymnasium. Cyril Berrington of the M.R.H. Physiotherapy Department (T e l e p h o n e Local 258) is the instructor. There is no special fee.

Curling: The Manitoba Rehabilitation H o s p i t a l Curling Club will be meeting Saturday mornings at the Grain Exchange Rink from 8:30 to 10:30. The fee is \$16.50 for the year; contact is Ken Rowswell, Sanatorium Board Purchasing A g e n t, Local 251.

The staff are also invited to join the Manitoba Medical Centre Curling League, which will be holding their meetings at the Victoria Rink Mondays from 5 to 7 p.m. The fee is \$20.00; contact is F. G. Joyce, Winnipeg General Hospital Personnel Department, Local 668.

Bowling: Five-pin bowlers from the Manitoba Rehabilitation Hospital and the Society for Crippled Children and Adults are now meeting Fridays from 9 to 11 p.m. at the Polo Park lanes. There is an initial fee of \$1.00, plus \$1.50 at the weekly meets. Contacts a r e Mrs. Mary Spencer, Sanatorium Board executive offices, Local 324, and Tom Pickering, Supervisor of Modern Building Cleaning Service, Local 375.

Those interested in 10-pin bowling are welcome to join the Manitoba Medical Centre teams at the Northgate Shopping Centre lanes Wednesdays 7 to 9 p.m. Contact F. G. Joyce, Winnipeg General Hospital Personnel Department, Local 668. The fee is \$3.00 initially, and \$1.50 each week.

Christmas Choir: Persons wishing to join the Christmas Choir should contact Miss E. L. M. Thorpe (Local 213), Miss Christina R i c k a r d s (Local 233) or Mrs. Frederica Jeffrey (Local 289). The M.R.H. Chapter is hoping for a good turn-out of both men and women singers to the practice sessions for this important annual event which takes the form of a Nine Lessons Christmas Service and Festival of Carols in the (Continued on page 4)

Tuberculosis Surveys

Between January 1 and September 1 of this year, a total of 77,846 Manitoba residents received free tuberculin tests in tuberculin surveys financed, in part, by the sale of Christmas Seals. Last month the Board's testing teams completed summer surveys of some 13 Manitoba municipalities and moved into the Winnipeg area to begin three more major anti-tuberculosis campaigns. Among the first to line up for skin tests were employees of the Manitoba government.

Premier Duff Roblin led his cabinet in getting the simple, painless skin test

Premier Duff Roblin led his cabinet in getting the simple, painless skin test in the Legislative Building September 23. Miss Mae Oakley, licensed practical nurse with the Sanatorium Board, administers the Heaf gun. Standing nearby are two of the Board's tuberculosis specialists: Dr. E. L. Ross, left, and Dr. D. L. Scott.



Other cabinet members quickly followed suit. Here the Hon. C. H. Witney, Minister of Health, examines his tuberculin card while the Hon. R. G. Smellie, Q.C., Minister of Municipal Affairs waits his turn.



From left to right, the Hon. Gurney Evans, Minister of Industry and Commerce, the Hon. Sterling Lyon, Q.C., Minister of Mines and Natural Resources, and Walter Brattson of the Queen's Printer, cheerfully submit to the test. The survey lasted two weeks and during that time nearly 1,500 civil servants were examined. After completing the job, the surveys team set up headquarters in St. Boniface October 13 to begin a month-long survey. —Photos by David Portigal & Co.

A Lively Program for Lonely People

The other evening a senior citizens' rhythm band from the Notre Dame Day Centre came to our Manitoba Rehabilitation Hospital to put on a concert for the patients and staff. It proved to be an evening of rare entertainment for everyone for, as

it turned out, the senior citizens' rhythm band is a real swinging group — by far the happiest, liveliest entertainers who have ever hit our hospital's stage.

Amateurs though they were, these people had a wonderful capacity for having fun and for encouraging others to join in their fun. For an hour and a half they played and sang familiar old melodies that have appealed to generations. There were lots of solos, some of them unusual . such as the old man who could play haunting tunes on a carpenter's saw. There was a couple who whistled a duet, a fiddler who could out-fiddle any young whippersnapper, an exceptionally good pianist, an accordionist, drummer in all, some 25 apple-cheeked grandmothers and grand fathers who played the harmonica, thumped bongo drums and tamborines and clacked clackers with such obvious delight and enthusiasm that soon the entire audience was singing, stomping and clapping right along with them.

The program, in fact, was "good therapy" for both the audience and the band, and it demonstrated again what doctors, social workers, psychologists and many others have been trying for years to drum into the heads of a youth-worshipping p u blic: that elderly people are normal, healthy human beings who, when given the chance, have a great deal to offer others,

It was to give lonely, elderly people a new interest in life that the Notre Dame Day Centre was formed four years ago on the recommendation of the Age and Opportunity Bureau of Winnipeg. To learn more about it, we paid a visit t o the centre the next day to interview the social workersupervisor, Don Browne.

The centre is located in a large hall under the In-dustrial Workshop at 590 Notre Dame Ave. When we arrived there the Wednesday afternoon social hour and sing-song was just under way. The rhythm band was again in full swing, and out on the floor some of the members were waltzing and foxtrotting and squaring off with their partners with great gusto. From the sidelines the other members and a sprinkling of guests watched the dancers with interest, occasionally voicing encour agement and approval.

The program ended with a tour of the premises (which consisted mainly of the big hall and stage, a nicely equipped library, snack centre and office facilities), after which the ladies graciously invited us to sit down for refreshments. Over the second cup of coffee, we were finally able to interview the busy

Mr. Browne and his Wednesday afternoon volunteers, Mrs. W. Irwin, Mrs. O. B. Smith and Mrs. M. Hossack. The Notre Dame Day Centre, they told us, serves on l y secondarily as a place f or social activities and recreation. Primarily, it is mental health and adult education program, designed to give the older person a purpose in life and to provide him with the opportunity t o become once again a useful,

contributing member of the

community. It's a sort of "emotional rehabilitation centre", Mr. Browne explained. "We try to keep the members happy and healthy in mind as well as body; to make our investments in medical and hospital services pay off." (And here the writer had to agree with him wholeamong heartedly, because the most active participants in the program that afternoon were two elderly ex-patients from our own rehabilitation hospital.)

To be eligible for membership in the Day Centre, an applicant must be at least 60 years of age and have a dollar in his pocket for the yearly membership fee. The dollar, we found out, buys a lot.

For some 180 members (most of whom are pensioners living alone in single rooms), a membership card is a passport to a wealth of activities provided right at the Day Centre from 9 a.m. to 5 p.m., Mondays through Fridays, under the supervision of Mr. Browne and his corps of 12 volunteers. Through their own executive committee, the members help plan the centre's prowhich ranges from gram large group activities, such as parties, outings, bingos, bridge and whist drives, films, lectures, games and dancing, to small group activities, including needlework, painting and sketching, drama, a glee club and, of course, the rhythm band.

A membership card enables the holder to get a hot, wholesome, noon-day meal at something like 35 cents. It also entitles him to a free counselling service for his personal problems, and a health counselling service provided free of charge by the Winnipeg Health Department.

For one dollar a member can buy these things and more — and if he still feels lonely, his membership card may well serve as a ticket of introduction to another lonely person who would love to marry him and make his life complete. During its short four-year history, the Day Centre has acquired a fairly wide reputation as a matrimonial bureau.

And what do members get from this to give back to the community? Well, as we mentioned b e f o r e, better mental health, a feeling of usefulness and a happier outlook on life. But in addition, there have been numerous tangible contributions t o the community. Here is part o f the record for 1963:

The members made 55,000 bedside bags from old newspapers for Concordia Hospital, and 59,000 wipes for the Red Cross. They raised \$600 at a tea and bake sale, and through various other projects, provided nearly 20 of the cost of running the centre. They held political rallies at election time, visited the sick and entertained them.

Each year the Rhythm Band entertains 800 senior citizens free of charge at the Playhouse Theatre, and a t other times they entertain in nursing homes, hospitals and service clubs. They arranged the entire program for the YMCA Christmas Party for the Aged.

This Day Centre belongs to the members, individually and as a group, Mr. Browne pointed out. Much of the redecorating and improvements to the hall have been done by them. "They contribute the money (of which they have little), the time (in which they are quite wealthy) and t h e e n e r g y (which is variable)."

The Notre Dame Day Centre, which is jointly operated by the Winnipeg Public Health Department and a Board of Directors, and is largely financed by the Winnipeg Kiwanis Club and the Winnipeg Foundation, is the only one of its kind in Canada.

"But to be the only one in Canada is nothing to be proud of," said Mr. Browne. "There is a crying need for these facilities everywhere."

To which, after viewing the good work carried out at 590 Notre Dame, we add our fervent Amen. More needs to

cents. It also entitles him to a free counselling service for his personal problems, and a ful people.

AROUND OUR INSTITUTIONS Continued from page 3)

hospital auditorium on Christmas Eve, and carol singing on the hospital wards.

Hallowe'en Party: The first staff social event of the season will be a Hallowe'en smorgasbord and dance on Saturday, October 31, at the Highwayman Night Club. This is a masquerade party and all the Sanatorium Board staff, their relatives an d friends are invited to join in the fun. Tickets at \$2.50 per person may be obtained from Mrs. Mary Spencer (Local 324) or Mrs. Patricia Jones (Local 314).

Brandon Curlers

George Lennox, chief physiotherapist at Assiniboine Hospital, was recently elected president of the hospital's curling club. Mrs. Bernice Erskine, of the nurses' assistants staff, was n a m e d secretary.

Some 50 members of the staff have signed up to curl this year at the Brandon Golf and Country Club. To raise funds for the club, members sold tickets on a cake.

Welcome Nurses

This month the Sanatorium Board's nursing service h as been strengthened with the arrival of two nurses from overseas. With great pleasure w e welcome Miss Grace Phillips of New Delhi, India, who will be a general staff nurse at Clearwater Lake Hospital, The Pas, and Miss Gertrude Bernard of Kingston, Jamaica, who has taken a general nursing post a t Manitoba Sanatorium, Ninette.

A graduate of Victoria Hospital, Ajmer, Miss Phillips has extensive experience in surgical nursing and for the past two years was in charge of the recovery room (handling 4,000 cases of all types every year) at Safdarjang Hospital in New Delhi.

Miss Bernard is a registered general nurse and a registered mental h e a l t h nurse, and has spent nine years in the service of the Government of Jamaica both at the University College Hospital of the West Indies and at Bellevue Hospital, Kingston. She was a school teacher before she became a nurse.

Bulletin Board

Edward Dubinsky, Sanatorium Board administr assistant, has been ek honorary secretary-treasurer of the Associated Hospitals of Manitoba. His election took place at the 13th annual Manitoba Hospital and Nursing Conference at the Royal Alexandra Hotel, Winnipeg, October 6 to 8. Mr. Dubinsky served as general chairman of the conference.

The Sanatorium Board was very happy to welcome three special guests to our Winnipeg headquarters this month: Dr. C. W. L. Jeanes, executive secretary of the Canadian Tuberculosis sociation, who paid us an informal visit on October 9; and Dr. H. T. Ewart, medical superintendent of the Hamilton Health sociation, and Miss W..., the association's director of nursing, who toured the M a n i t o b a Rehabilitation Hospital on October 8.

Dr. Ewart was formerly medical superintendent of the 750 - bed Mountain Sanatorium in Hamilton which, until it was converted for another type of hospital care, was the largest tuberculosis sanatorium in the Commonwealth. Dr. Ewart continues to act as medical director of the new hospital complex, which is presently planning special rehabilitation facilities.

On September 25 the Hon. C. H. Witney, provincial minister of health, accompanied by Deputy Health Minister Dr. Me Elliott, Dr. A. R. Ta, r of the Department of Health Administrative Section, and T. A. J. Cunnings, Sanatorium Board Executive Pirector, toured Mani a Sanatorium at Ninette and Assiniboine Hospital, Brandon.

The Sanatorium Board was saddened to learn of the death October 4 of Dr. R. M. Creighton, D. P. H., formerly director of Preventive Services in the Manitoba Department of Health, and from 1956 to 1961, a statutory member of the Sanatorium Board.

It is also with great regret that we report the death on September 30 of William (Bill) Klippenstein who the past two years had hand a very able member of the Maintenance Department at the Manitoba Rehabilitation Hospital. Our deepest sympathy is extended to his family.